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## **BIB DATA SHEET**

## **CONFIRMATION NO. 3343**

| SERIAL NUMB  | BER   | FILING or 371(c) |                  | CLASS         | GROUP ART UNIT |                                       | ATTORNEY DOCKET |             |  |
|--|---|------------------|------------------|---------------|----------------|---------------------------------------|-----------------|-------------|--|
| 10/551,393   | 3   | 06/30/2006       |                  | 700           | 3664           |                                       | 450100-05036    |             |  |
|  | RULE  |                  |                  |               |                |                                       |                 |             |  |
| APPLICANTS  Masanori Omote, Kanagawa, JAPAN;   |   |                  |                  |               |                |                                       |                 |             |  |
| ** <b>CONTINUING DATA</b> ***********************************  |   |                  |                  |               |                |                                       |                 |             |  |
| ** FOREIGN APPLICATIONS ************************************   |   |                  |                  |               |                |                                       |                 |             |  |
| ** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 07/22/2006   |   |                  |                  |               |                |                                       |                 |             |  |
| Foreign Priority claimed   |   | Yes No           | after            | STATE OR      | SHEETS         | ТОТ                                   |                 | INDEPENDENT |  |
| 35 USC 119(a-d) conditions met Yes No  Verified and /MCDIEUNEL MARC/ Acknowledged Examiner's Signature  Met after Allowance  Met After Allowance  Initials |   |                  | COUNTRY<br>JAPAN | DRAWING<br>10 | S CLAI         | _                                     | CLAIMS<br>2     |             |  |
| ADDRESS  |   |                  |                  |               |                |                                       |                 |             |  |
| William S Frommer  |   |                  |                  |               |                |                                       |                 |             |  |
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| New York, NY 10151   |   |                  |                  |               |                |                                       |                 |             |  |
| UNITED STATES  TITLE   |   |                  |                  |               |                |                                       |                 |             |  |
| Robot device, information processing method, and program   |   |                  |                  |               |                |                                       |                 |             |  |
|  | ☐ All Fees  |                  |                  |               |                |                                       |                 |             |  |
|  | FEES: Authority has been given in Paper No to charge/credit DEPOSIT ACCOUNT No for following: |                  |                  |               |                | 1.16 Fees (Filing)                    |                 |             |  |
| I FILING FEE I   |   |                  |                  |               |                | ☐ 1.17 Fees (Processing Ext. of time) |                 |             |  |
|  |   |                  |                  |               |                | 1.18 Fees (Issue)                     |                 |             |  |
| 1030   |   |                  |                  |               |                | Other                                 |                 |             |  |
|  |   |                  |                  |               |                | ☐ Credit                              |                 |             |  |
|  | La Orean  |                  |                  |               |                |                                       |                 |             |  |